

## **310 Board Plan**

**Name of 310 Board:** Riverbend Center for Mental Health

**Counties Served:** Colbert, Franklin, Lauderdale

**Populations Served:** Mentally Ill, Substance Abuse

**Vision Statement:** To be the model provider of mental health services in the State with a reputation of effectiveness to the extent that Riverbend will be the first choice of those seeking help.

**Mission Statement:** Riverbend Center for Mental Health shall provide the residents of Colbert, Franklin and Lauderdale Counties access to a comprehensive array of professional, medical and rehabilitative services for the diagnosis and treatment of mental illnesses, substance abuse and emotional conditions.

### **I. Plan Development**

#### **1. Planning Cycle**

Every two years in accordance with the Department of Mental Health's (DMH) Administrative Code - Administrative Standards for 310 Boards, Riverbend Center for Mental Health's Board of Directors develops and adopts a plan of services. This plan specifies the type, the quantity and location of services to be provided to the populations defined by DMH as Seriously Mentally Ill Adults/Elderly (SMI), Severely Emotionally Disturbed Children & Adolescents (SED) and/or those in need of Substance Abuse Prevention and Treatment (SA).

#### **2. Roles of Key Stakeholders**

Riverbend's Board of Directors solicits and obtains information through participation in regularly scheduled meetings and/or surveys with a wide range of key stakeholders. Using the information gathered from these meetings and surveys the Board identifies both met and unmet community mental health needs. The needs are prioritized by the Board, with key stakeholders impacted by the specific need having an opportunity to provide feedback. Because of the widely diverse group of stakeholders the Board's plan is reflective of the community as a whole. Stakeholders are also solicited regarding the development and sharing of resources to meet identified needs.

Current active key stakeholders of Riverbend include but are not limited to the following:

**Recipients of Services**  
Consumers  
Families

**State of Alabama Agencies**

Alabama Medicaid Agency  
Department of Human Resources  
Colbert, Franklin and Lauderdale Counties  
Department of Mental Health  
Department of Youth Services  
Department of Rehabilitation Services  
Department of Public Health  
Colbert, Franklin and Lauderdale Counties

**Community Agencies and Advocacy Groups**

Alabama Head Injury Foundation  
Area Agency on Aging  
Children's Advocacy Center  
Children's Policy Council  
Colbert, Franklin and Lauderdale Counties  
Coalition of Alzheimer's and Related Disorders (C.A.R.D.)  
Colbert-Lauderdale Attention Homes, Inc.  
Day-by-Day Support Group  
Facilitation/Multi-Needs Teams  
Colbert, Franklin and Lauderdale Counties  
Help Center  
Homeless Care Council of Northwest Alabama  
Hospice of the Shoals  
Independent Living Associates  
Lauderdale County Domestic Violence Response Coalition  
Legal Services Corporation of Alabama  
Loaves and Fishes  
NAMI Franklin Co.  
NAMI Shoals  
North Alabama Council of Local Governments (NACOLG)  
North Alabama Skills Center  
Rape Response  
Safeplace, Inc.  
Salvation Army  
Shoals Family Success Center  
Shoals Sharing Group: Consumer Advocacy  
Shoals Treatment Center: Methadone Maintenance  
Social Security Administration  
Substance Abuse Council of Northwest Alabama Inc. Freedom House  
The Healing Place a Center for Loss and Change, Inc.  
Veterans Affairs Health Clinic  
Volunteers of America North Alabama Inc. (VOA)

**Riverbend Board Governing Bodies**

City of Florence  
City of Muscle Shoals  
City of Russellville  
City of Sheffield  
City of Tuscumbia  
Colbert County Commission  
Franklin County Commission  
Lauderdale County Commission  
Town of Killen  
Town of Rogersville

## **Hospitals**

Bryce Hospital, Tuscaloosa  
Eliza Coffee Memorial (ECM) Hospital, Florence  
Helen Keller Memorial Hospital, Sheffield  
Mary Starke Harper Geriatric Psychiatry Center, Tuscaloosa  
North Alabama Regional Hospital, Decatur  
Red Bay Hospital, Red Bay  
Russellville Hospital, Russellville  
Shoals Hospital, Muscle Shoals

## **Legal Authorities**

Community Mental Health Officers  
Colbert, Franklin and Lauderdale Counties  
County Drug Courts  
Colbert, Franklin and Lauderdale Counties  
Juvenile Judges  
Colbert, Franklin and Lauderdale Counties  
Juvenile Probation  
Colbert, Franklin and Lauderdale Counties  
Probate Judges  
Colbert, Franklin and Lauderdale Counties

## **Intellectual Disabilities**

ARC of Franklin County  
ARC of the Shoals  
SCOPE 310 (Shoals Committee on Programs and Employment for Mental Retardation)

## **Nursing Homes**

Florence Nursing & Rehabilitation Center  
Burns Nursing Home  
Care Center of Red Bay  
El Reposo Nursing Facility  
Glenwood Rehabilitation and Convalescent Center  
Lauderdale Christian Nursing Home  
Mitchell-Hollingsworth Nursing and Rehabilitation Center  
Russellville Health Care, Inc.  
Sunbridge Care and Rehabilitation Shoals  
Keller Landing Care and Rehabilitation Center  
Sunbridge Care and Rehabilitation for Muscle Shoals  
Terrace Manor Nursing and Rehab, Inc.

## **Schools**

City of Florence Board of Education  
City of Muscle Shoals Board of Education  
City of Russellville Board of Education  
City of Sheffield Board of Education  
City of Tuscumbia Board of Education  
Colbert County Board of Education  
Franklin County Board of Education  
Lauderdale County Board of Education  
Community Action Partnership of North Alabama  
North West Shoals Community College  
University of North Alabama  
W.C. Handy Head Start

### 3. Implementation Monitoring and Evaluation of Plan

The plan is developed for presentation and adoption by the Riverbend Board of Directors by the Management of Riverbend Center for Mental Health under the direction of the Chief Executive Officer.

Implementation: Following Board adoption of the plan, the administrative and/or program service area responsible for implementation meets with key stakeholders to address the needs of the plan. As resources are realized, necessary actions are then taken to begin implementation.

Monitoring: Monitoring of the two-year plan is done through Riverbend's Performance Improvement Program. The results of the monitoring of the plan are reported to Riverbend's Executive Board by the Chief Executive Officer's written monthly Information Report and oral monitoring reports. Any additional information is also presented and recorded in the Executive Board minutes.

Evaluation: Evaluation is accomplished by way of feedback given from key stakeholders during the regularly scheduled meetings and surveys. This information, along with information gathered by Riverbend's Performance Improvement Program, is then presented to the Board for discussion and use in future planning.

## II. Plan Components

### 1. Population

#### a. Description of type of populations served:

Seriously Mentally Ill Adults/Elderly (SMI)  
Severely Emotionally Disturbed Children & Adolescents (SED)  
Substance Abuse Prevention and Treatment (SA)

#### b. Demographics of population by county:

**Population of Riverbend Counties by Race 2000 Census**

| County     | Population | White     | Black     | Other   |
|------------|------------|-----------|-----------|---------|
| Colbert    | 54,984     | 44,825    | 9,137     | 1,022   |
|            |            | 81.5%     | 16.6%     | 1.8%    |
| Franklin   | 31,223     | 28,924    | 1,314     | 985     |
|            |            | 92.6%     | 4.2%      | 3.1%    |
| Lauderdale | 87,966     | 77,743    | 8,663     | 1,560   |
|            |            | 88.3%     | 9.8%      | 1.7%    |
| Total      | 174,173    | 151,495   | 19,114    | 3,567   |
|            | 3.9%       | 86.9%     | 10.9%     | 2.0%    |
| State      | 4,447,100  | 3,162,808 | 1,155,930 | 128,362 |
|            | 100%       | 71.1%     | 25.9%     | 2.8%    |

### Riverbend Consumers by County by Race Fiscal Year 2008

| County     | Consumers | White | Black | Other |
|------------|-----------|-------|-------|-------|
| Colbert    | 1,662     | 1,259 | 359   | 44    |
|            | 3.0%      | 75.8% | 21.6% | 2.6%  |
| Franklin   | 902       | 820   | 48    | 34    |
|            | 3.9%      | 90.9% | 5.3%  | 3.8%  |
| Lauderdale | 3,248     | 2,569 | 578   | 101   |
|            | 3.7%      | 79.1% | 17.8% | 3.1%  |
| Total      | 5,812     | 4,648 | 985   | 179   |
|            | 3.3%      | 80.0% | 16.9% | 3.1%  |
| State      | 120,606*  |       |       |       |
|            | 2.7%      |       |       |       |

- Source: State Consumers derived from DMH Fiscal Year 2008 Report. 99,641 Mental Illness consumers served state-wide in community programs. 20,965 Substance Abuse consumers served state-wide in community programs.

### Riverbend Consumers by County by Primary Service Population Fiscal Year 2008

| County     | Consumers | SMI     | SED     | SA      |
|------------|-----------|---------|---------|---------|
| Colbert    | 1,662     | 1,182   | 385     | 190     |
|            |           | 77.1%   | 33.1%   | 11.4%   |
| Franklin   | 902       | 608     | 189     | 106     |
|            |           | 67.4%   | 21.0%   | 11.8%   |
| Lauderdale | 3,248     | 2,047   | 776     | 530     |
|            |           | 63.0%   | 23.9%   | 16.3%   |
| Total*     | 5,812     | 3,837   | 1,350   | 826     |
|            |           | 66.0%   | 23.2%   | 14.2%   |
| State      | 120,606*  | 74,306* | 25,335* | 20,965* |
|            |           | 61.6%   | 21.0%   | 17.4%   |

- Source: State Consumers derived from DMH Fiscal Year 2008 Report. 99,641 Mental Illness consumers served state-wide in community programs (74,306 SMI, 25,335 SED). 20,965 Substance Abuse consumers served state-wide in community programs. Dual diagnosed results in a total greater than 100%.

### County Population, Riverbend Consumers Age 18 and Under Fiscal Year 2008

| County     | Under 18  | Consumers | SED     |
|------------|-----------|-----------|---------|
| Colbert    | 13,077    | 404       | 385     |
|            | 23.8%     | 24.3%     | 95.3%   |
| Franklin   | 7,645     | 198       | 189     |
|            | 24.5%     | 22.0%     | 95.5%   |
| Lauderdale | 20,267    | 812       | 776     |
|            | 23.0%     | 25.0%     | 95.6%   |
| Total      | 40,990    | 1,414     | 1,350   |
|            | 23.5%     | 24.3%     | 95.5%   |
| State      | 1,123,422 | 25,335*   | 25,335* |
|            | 25.3%     | 25.4%     | 100%    |

- Source: State Consumers derived from DMH Fiscal Year 2008 Report. 25,335 Children and Adolescents served state wide in local community mental health centers.

## **2. Community Needs/Service Priorities**

### **a. How needs are assessed:**

Annually information obtained from stakeholders regarding community needs/services is reviewed by the Management of Riverbend. Management then prioritizes the identified needs based on Riverbend Center for Mental Health's Board of Directors adopted Operating Philosophy, Beliefs and Values.

- Citizens of the Shoals come from diverse backgrounds and experience varied mental health needs of the community. Organization-wide services will be coordinated to insure continuity with other community resources. When the needs of an individual and the needs of society are in conflict, Riverbend will strive to assure that the individual's rights are protected within the limits of societal needs.
- Our service delivery processes will be monitored to ensure they remain appropriate, effective, and available in the changing healthcare environment, both financially and medically. While various treatment approaches are recognized, the primary approach of Riverbend for non-seriously mentally ill consumers will be short-term, goal directed interventions.
- Seriously mentally ill and substance abusing consumers will be provided levels of care which meet their needs and are based on nationally established medically necessary criteria.
- Expressed and anticipated needs of consumers, families and referral sources will have primary consideration when designing services and establishing policies and procedures. We will encourage feedback and respond appropriately.
- A formal performance improvement process will be maintained in order to assure that consumers receive the highest quality of services possible. Responsiveness at every level of the organization will be our goal.
- There will be an ongoing assessment of personnel policies to insure the fair treatment of the individual employed. We will strive to see that our staff is well-trained and well-paid. Staff whose performance is superior will be recognized.
- The financial stability of Riverbend must be of primary consideration; therefore, financially self-supporting programs will be given priority, as no governmental entity has the obligation to appropriate financial aid. While we are committed to concern for the whole

person, there is recognition that no one agency can be all things to all people. Therefore, we will limit our involvement at the point where it is determined we are not demonstrating or cannot demonstrate effectiveness.

**b. Greatest areas of unmet needs:**

**Funding for Indigent Services**

Riverbend's operation is dependent on its contract with DMH. It uses the state funds intended for indigent care to have state Match funds to provide Medicaid Rehabilitation Option services and generate federal revenue. This contract is not guaranteed and is subject to fluctuations of the states revenues. Local revenue has been stagnant for the past 25 years at less than \$200,000 annually. These factors result in minimal funds being available to provide indigent services. Demand for services is greater than resources available.

**Limited Housing for Seriously Mentally Ill (SMI)**

**Adults**

Seriously Mentally Ill Adults are being maintained in the community without enough community beds to provide an appropriate level of care.

**Funding for Substance Abuse Services**

DMH contract funds for adult substance abuse treatment are exhausted in June. Demand for services continues to increase with limited funding to provide even current level of services. DMH provides only \$8,200 annually for adolescent substance abuse treatment.

**3. Description of Services/Supports provided and needed expansions**

**Funding for Indigent Services**

Medicaid Match must be certified as representing expenditures eligible for Federal Fiscal Participation. Riverbend's only source for Match are the state dollars contained in its contract with the DMH and appropriations from local governing bodies that have been authorized to provide funding to Riverbend under ACT 310 (Code of Alabama, Section 22-51-14). This Match funding needs to be separated from funding intended to provide indigent services.

**Housing for Seriously Mentally Ill (SMI) Adults**

Riverbend currently operates and/or contracts for the following Residential Care Beds: 16 Residential Care Home Beds Specialized Behavioral Beds, 3 Specialized Foster Care Home Beds, 11 Medical, Observation, Meals

(MOM's) Beds and 18 Semi-Independent Living with Intensive Supervision Beds, for a total of 48 community beds. Additional Semi-Independent Living with Intensive Supervision Beds is needed to maintain the SMI population Riverbend serves living in the community.

**Substance Abuse Services Funding**

State-wide, 17.4% of DMH, SMI/SED/SA community service recipients have been individuals with a primary issue of substance abuse. Riverbend consumers include 14.2% whose primary treatment need is substance abuse. As the majority of individuals seeking services have no insurance, funding of services and is currently solely dependent on Riverbend's contract with DMH.

**4. Resource Development & Allocation – Current and future funding resources for planned expanded capacity**

**Funding for Indigent Services**

Both State and Local entities are petitioned to increase available funding for indigent services. Service capacity needs to increase to and be maintained at a level where needed non-emergent medically necessary levels of care services are available within 72 hours of the identified need.

**Housing for Seriously Mentally Ill (SMI) Adults**

Planning with DMH is ongoing to transition extended care state hospital services to the community. The funding attached to these hospital services would then be available to expand community services. Grant opportunities are also examined as a potential funding source.

**Substance Abuse Service Funding**

Riverbend, with local court systems, is explores treatment funds associated with Drug Courts. Plan to continue to respond to any DMH Requests for Proposals that provide outpatient treatment for adults and adolescents.

**III. Goals/Objectives**

**1. Goal:**

Access to Medically Necessary Services for individuals indentified as SMI/SED consumers will be available within 72 hours.

**Objective:**

Increase availability of funds from the state of Alabama and local governments at a level that meets with service demand.



**2. Goal:**

Increase and improve the quality and quantity of affordable housing to Riverbend's SMI service population.

**Objective:**

Identify means through contract and/or grants to obtain and staff residential facilities.

**3. Goal:**

To acquire additional funding for the provision of outpatient substance abuse treatment.

**Objective:**

Work with local court systems in finding grants for treatment funding.

## **Addendum:**

### **Ongoing Plans and Priorities**

#### **1. Fiscal Stability**

##### **\$2,000,000 Reserve**

Riverbend's operating expenses exceed \$8,000,000 annually. As a not-for profit organization and because of periodic uncertainty connected with our funding sources, a minimum of three months uncommitted cash reserve needs to be established. Our daily cash position is approximately \$800,000.

Riverbend needs to move toward establishing a \$2,000,000 reserve, while maintaining existing operations.

##### **Staff Retention**

All organizations need a level of employee turnover. However, it is difficult to develop systems that improve efficiency when the foundations on which operational systems are being built upon consistently have to be rebuilt. Riverbend is viewed by many agencies as a good training ground for employees. Our salaries for degreed staff are not competitive with other degreed professions.

Riverbend needs to obtain and maintain a salary structure that does not contribute to staff turnover.

##### **Riverbend Foundation**

Riverbend has a Foundation with assets of approximately \$3,000,000. The stated purpose of the Foundation in its Articles of Incorporation is to "...operate for the benefit of Riverbend Center for Mental Health..."

A stronger relationship between the Foundation and the Center needs to be created, with clear guidelines on the benefits should be defined.

#### **2. Main Center Property**

The title to the building and property is in the name of Lauderdale County and the City of Florence. This occurred as a condition of securing the federal construction grant in the 1960's. It has always been maintained, insured and listed as a center asset in the centers audit.

The center needs to acquire clear title to the buildings and property.

#### **3. Capital Issues**

##### **Sunrise Lodge**

Sunrise Lodge opened in June 1987. The facility consists of two double-wide trailers. Over 20 plus years of operation it is estimated that over 6,000 men have been treated in the facility. Given the age, construction and use of the facility maintenance needs are constant. The current facility is not handicap accessible.

Time frames need to be established to replace the facility. Consideration in this planning should consider increasing bed capacity to 16.

### **Space**

The main facility has outgrown the office space that is available. The original construction limits the ability to make renovations.

Consideration needs to be given to facility expansion to meet current and future needs.

#### **4. Service Expansion**

##### **Colbert County**

Riverbend has no treatment facility in Colbert County where outpatient services are provided. Over the years different efforts have been made to provide outpatient services in numerous leased spaces. However, the economic realities have made sustainment of a stand-alone facility unfeasible. This at times limits Riverbend's visibility and its relationship with Colbert County referral sources.

Colbert County and its municipalities appoint 40% of Riverbend's Board of Directors. Evaluation of the political and public relations impact of the absence of a facility is ongoing.

##### **In-School Services**

Riverbend has established in-school services with the majority of school systems in its catchment area. The demand by other systems has grown and provides a positive revenue source.

Riverbend needs to be positioned to respond to new requests when the opportunity presents. Having an adequately trained workforce available hinders the ability to respond.

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